



Waste Discharge Self Monitoring Report

Metro, Industrial Waste
1300 Nickerson St., Suite 200,
Seattle, WA 98109-1658

Company Name Alaskan Copper Works Station No. 7201 Month September 19 95 No. of Employees (per day) Average Maximum
Permit No. Site No. All units mg/l unless otherwise noted Industry Type

Sample Dates (circle)	Sample Type C (composite) or G (grab)	pH		Cadmium, Cd	Chromium, Cr	Copper, Cu	Lead, Pb	Mercury, Hg	Nickel, Ni	Silver, Ag	Zinc, Zn	Cyanide, CNA	Cyanide, CNT	Fats, Oils and Grease (FOG)	Total Toxic Organics (TTO)	Other Parameters	Flow (gpd) Total	Flow (gpd) Industrial	Flow (gpd) Storm	Notes
		Min	Max																	
1																				
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
12																				
13																				
14																				
15																				
16																				
17																				
18																				
19																				
20																				
21																				
22																				
23																				
24																				
25																				
26																				
27																				
28																				
29																				
30																				
31																				
Min.																				
Max.																				
Average																				

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Principal Executive or Authorized Agent [Signature] Date

Please circle all permit violations

Additional Comments